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FACSIMILE TRANSMISSION COVER SHEET

Date: August 2, 2007

To: United States Patent and Trademark Office
Examiner: Holton, Steven E.; Art Unit: 2629

Fax: (571) 273-8300

Re: **Application Serial No.: 10/660,818**
Filing Date: 9/12/2003; First-Named Inventor: McKay
Attorney Docket No.: 0270101

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 40

Message:

Enclosed please find the Amendment and Response to Non-Final Office Action dated July 25, 2007.

Payment for Extra Claims Fee in the Amount of \$100.00 is hereby enclosed on Form PTO-2038.

Thank you.

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Attorney Docket No.: 0270101

AMENDMENT COVER SHEET

IN RE APPLICATION OF: McKay, BrentSERIAL NO.: 10/660,818 FILED: 9/12/2003FOR: Display Panels and Methods and Apparatus for Driving the SameHONORABLE COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☐ No additional fee is required.☒ The fee has been calculated as shown below:☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00☒ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	75	MINUS **77	* =	x 50	x 25	\$
INDEPENDENT	19	MINUS ***18	* = 1	x 200	x 100	\$ 100.00
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 100.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
 ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
 *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

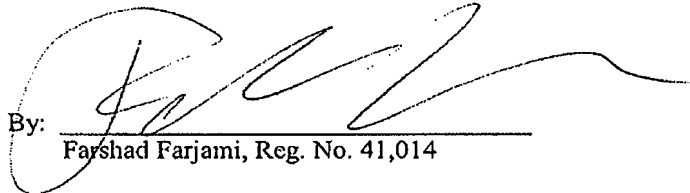
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Attorney Docket No.: 0270101

- ☒ Enclosed is the total fee of \$ 100.00 (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-0731 in the amount of \$
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

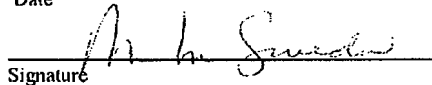
Date: 8/2/07

By: 
Farshad Farjami, Reg. No. 41,014

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being filed by facsimile transmission to United States Patent and Trademark Office at facsimile number 571-273-8300 on the date stated below. The facsimile transmission report indicated that the facsimile transmission was successful.

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Date


Signature

Marci M. Sweda
Name of Person Performing Facsimile Transmission

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Application Serial No.: 10/660,818

Attorney Docket No.: 0270101

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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AUG 02 2007

In re Application of: **Brent McKay**

Art Unit: 2629

Serial No.: 10/660,818

Examiner: Holton, Steven E.

Filed: September 12, 2003

For: **Display Panels and Methods and Apparatus
for Driving the Same**

AMENDMENT AND RESPONSE TO *NON-FINAL* OFFICE ACTION

Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

This Amendment and Response is submitted in response to the *Non-Final* Office Action, dated July 25, 2007, in the above-referenced patent application. Please enter and consider the following amendments and remarks.

08/03/2007 WABDELRI 00000076 10660818

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